



County of Burlington

Department of Resource Conservation

50 Rancocas Rd., Mount Holly, NJ 08060
Mailing: P.O. Box 6000, Mount Holly, NJ 08060
(856) 642-3850 • www.co.burlington.nj.us

Eve A. Cullinan, *County Administrator*

Board of County Commissioners

Felicia Hopson, Director
Dan O'Connell, Deputy
Linda A. Hynes
Tom Pullion
Balvir Singh

BURLINGTON CADB RESOLUTION # 2021-06

Site Specific Agricultural Management Practice Determination Under The New Jersey Right to Farm Act Diane & Grant Gabler

Pemberton Township Block 800, Lot 4.10
July 8, 2021

WHEREAS, Diane & Grant Gabler on behalf of Pinelands Produce, the current operators of the above-referenced farm ("Applicant"), have applied to the Burlington County Agricultural Development Board ("CADB") pursuant to the NJ Right to Farm Act ("Act") detailed in N.J.A.C. 2:76-2.3 requesting a Site Specific Agricultural Management Practice ("SSAMP") determination as to whether or not certain proposed activities on the above referenced property are consistent with the permissible activities detailed in N.J.S.A. 4:1C-9 et al.; and

WHEREAS, Diane & Grant Gabler currently operate a produce and vegetable farm on the above-referenced property; and

WHEREAS, the CADB conducted its regularly scheduled meeting on March 11, 2021, due notice of said meeting was given in accordance with New Jersey Statutes and the Open Public Meetings Act and a quorum of the CADB being present at the meeting; the matter of eligibility was heard; and

WHEREAS, the CADB adopted resolution 2021-02 certifying eligibility under the RTF act for the Applicant on the subject property; and

WHEREAS, on May 13, 2021 the CADB conducted its regularly scheduled meeting, due notice of said meeting was given in accordance with New Jersey Statutes and the Open Public Meetings Act and a quorum of the CADB being present at the meeting; the matter of the SSAMP was heard; and

WHEREAS, the Applicant has submitted proof of written notice as required in N.J.A.C. 2:76-2.8; and

WHEREAS, the Applicant was represented by Diane & Grant Gabler; and

WHEREAS, the CADB reviewed and confirmed the information contained in the following Exhibits:

Submitted by the Applicant:

Exhibit A – Proof of Adjacent Property Owner Notice

Exhibit B - Site Specific Agricultural Management Practice request related to the multi-use shipping container used as a customer pick-up location and as a packing area for orders

Exhibit C- Pemberton Township zoning violation dated 2-10-2021

WHEREAS, CADB staff detailed the nature of the SSAMP request and the Applicant's request to allow a storage structure to remain in its existing location which does not comply with Pemberton Township's setback zoning ordinance; and

WHEREAS, CADB staff presented background information related to the site conditions as they relate to the zoning violation; and

WHEREAS, CADB staff reported that the existing storage structure was approximately 60 feet from the edge of pavement from Kennedy Lane; and

WHEREAS, CADB staff reported that the structure was used for agricultural purposes including the storage of miscellaneous farm tools, sales records, seed and other common farm items; and

WHEREAS, CADB staff contacted the Pemberton Township zoning office on various occasions to discuss the nature of the SSAMP request and the Right to Farm process; and

WHEREAS, CADB staff reviewed comments received from the Township of Pemberton expressing support for the current location if the natural, vegetative screening is maintained; and

WHEREAS, the Board has considered affording Right to Farm protection for the location of the existing farm storage structure; and

WHEREAS, the Board considered the municipal setback ordinance as it relates to the location of the existing structure; and

WHEREAS, N.J.S.A. 4:1C-9 of the Act, details the specific permissible activities protected by the Act, including:

- Processing and packaging of the agricultural output of the farm

WHEREAS, pursuant to N.J.S.A. 4:1C-9, the commercial farm must be in compliance with all relevant federal or State statutes or rules and regulations adopted pursuant thereto, and not pose a direct threat to public health and safety; and

NOW, THEREFORE BE IT RESOLVED that the Board makes the following findings:

1. The applicant meets the eligibility criteria as required under the Act
2. The commercial farm is in compliance with all relevant federal or State statutes or rules and regulations adopted pursuant thereto, and does not pose a direct threat to public health and safety; and
3. The agricultural structure is appropriately located for its multiple agricultural uses
4. The existing location of the agricultural structure in question shall not be subject to the Pemberton Township municipal setback requirement
5. The activities for which the applicant is seeking an SSAMP determination are protected activities detailed in N.J.S.A. 4:1C-9 and in N.J.A.C. 2:76 2A.13

NOW, THEREFORE, BE IT FURTHER RESOLVED that copies of this resolution shall be provided to the SADC, Pemberton Township and the Applicant.

Exhibit A – Proof of Notification of Adjacent Property Owners

Notification of Adjacent Property Owners

April 4th 2021

SENT VIA CERTIFIED MAIL

Pemberton Twp. Board of Education

148 Arney's Mt Road

PO Box 228

Pemberton NJ 08068

Blk 800 Lot 4.01

To Whom it may concern,

Please be advised a public hearing will be held virtually on May 13th by the Burlington County Agricultural Development Board for Site Specific Agricultural Management Practice Recommendation regarding the use and location of the shipping container that currently exists on the site as a generally accepted agricultural operation or practice at 4 Kennedy Lane Pemberton NJ 08068, Block 800 Lot 4.10. The Board requires that all properties within 200ft of the subject property be notified. Documents in support of the commercial farm's request and public comments at and/or prior to the hearing are available at the Burlington County Dept. Of Resource Conservation at 50 Rancocas Road PO Box 6000 Mount Holly NJ 08060 from 9am to 4pm (Mon-Fri). In addition, you may also contact Brian Wilson @ 856-642-3850 or via email, bwilson@co.burlingtonnj.us, to schedule an appointment or submit any comments.

5/13/21 CADB Meeting

Thu, May 13, 2021 7:30 PM - 9:30 PM (EDT) Please join my meeting from your computer, tablet or smartphone. <https://global.gotomeeting.com/join/353080805> You can also dial in using your phone. (For supported devices, tap a one-touch number below to join instantly.) United States: +1 (646) 749-3122- One-touch: <tel:+16467493122>, 353080805 #Access Code: 353-080-805

Sincerely,

Diane & Grant Gabler

417 Kentucky Trail Browns Mills NJ 08015

Pinelandsproduce@yahoo.com

609-284-2080

OWNER & ADDRESS REPORT

PEMBERTON TWP

200 FT. LIST FOR BLOCK 800 LOT 4.10, 4 KENNEDY LANE PEMBERTON NJ 08068
REQUESTED BY: DIANE GABLER

03/15/21 Page 1 of 1

BLOCK	LOT	QUAL	CLA	PROPERTY OWNER	PROPERTY LOCATION	Add'l Lots
800	4.01		15A	PEMBERTON TWP BOARD OF EDUCATION PO BOX 228 PEMBERTON, NJ 08068	148 ARNEY'S MT RD ✓	
800	4.02		2	FORBES, KATELYN & ROESSLER, FREDERICK 172 ARNEY'S MT RD PEMBERTON, NJ 08068	172 ARNEY'S MT RD ✓	
800	4.03		2	MARLIN, CHARLES E JR & STEPHANIE L 2 KENNEDY LN PEMBERTON, NJ 08068	2 KENNEDY LN ✓	
800	4.04		2	MONTGOMERY, WILLIAM 21 KENNEDY LN PEMBERTON, NJ 08068	21 KENNEDY LN ✓	
800	4.05		2	DIXON, JANET L 23 KENNEDY LN PEMBERTON, NJ 08068	23 KENNEDY LN ✓	
800	4.06		2	LEONARD, WAYNE J & MADELINE 25 KENNEDY LN PEMBERTON, NJ 08068	25 KENNEDY LN ✓	

THE PINELANDS COMMISSION
PO BOX 359
NEW LISBON N.J. 08064 ✓

PSE&G
MANAGER-CORPORATE PROPERTIES ✓
80 PARK PLAZA T6B
NEWARK N.J. 07102

Zoning board Secretary +
Clerk ✓

500 Pemberton Browns Mills Rd.
Pemb. NJ 08068

State Agr. Development Committee
P.O. Box 330 ✓
Trenton NJ 08625

County Planning Board
49 Rancocas Rd.
P.O. Box 6000
Mt Holly NJ 08060

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

William Montgomery
21 Kennedy Lane
Pemberton NJ 08068

9590 9402 3852 8032 9712 24

Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X

☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
4-29-21

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

A. Signature
X

☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
4-29-21

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Priority Mail Express®
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

S Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

Stephanie + Charles Martin Jr.
2 Kennedy Lane
Pemberton NJ 08068

9590 9402 3852 8032 9712 17

Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X

☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
4-29-21

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

1. Article Addressed to:

2. Article Number (Transfer from service label)

3. Service Type
☐ Priority Mail Express®
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

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Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

Pemberton Twp. Board of Ed.
148 Arneys Mount Rd.
P.O. Box 228
Pemberton NJ 08068

9590 9402 3852 8032 9711 70

Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X

☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
4-29-21

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

A. Signature
X

☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
4-29-21

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Priority Mail Express®
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

S Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

1. Article Addressed to:

2. Article Number (Transfer from service label)

3. Service Type
☐ Priority Mail Express®
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:
Janet L. Dixon
23 Kennedy Lane
Pemberton NJ 08068

9590 9402 3852 8032 9712 48

1. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
4-30-21

C. Date of Delivery
4-30-21

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery
☐ Insured Mail ☐ Signature Confirmation (over \$500)
☐ Insured Mail Restricted Delivery (over \$500)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
N. Biacco

C. Date of Delivery
4-30-21

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Return Receipt for Merchandise

US Form 3811, July 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:
State Agr. Development Comm.
P.O. Box 330
Trenton NJ 08625

9590 9402 3852 8032 9712 62

1. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
APR 30 2021

C. Date of Delivery
4-30-21

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery
☐ Insured Mail ☐ Signature Confirmation (over \$500)
☐ Insured Mail Restricted Delivery (over \$500)

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:
Burlington County Fair
49 Rancocas Rd
PO Box 6000
MT Holly NJ 08060

9590 9402 3852 8032 9712 55

1. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
4-30-21

C. Date of Delivery
4-30-21

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Return Receipt for Merchandise

US Form 3811, July 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:
The Pinelands Commission
P.O. Box 359
NEW LISBON NJ 08064

9590 9402 3852 8032 9712 00

1. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
C. Ebersberger

C. Date of Delivery
4/30/21

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery
☐ Insured Mail ☐ Signature Confirmation (over \$500)
☐ Insured Mail Restricted Delivery (over \$500)

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■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:
Wayne + Madeline Leonard
25 Kennedy Lane
Pemberton NJ 08068

9590 9402 3852 8032 9712 31

1. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
4-30-21

C. Date of Delivery
4-30-21

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Return Receipt for Merchandise

US Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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COMPLETE THIS SECTION ON DELIVERY

U.S. Postal Service™
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For delivery information, visit our website at www.usps.com™.

Mount Pleasant NJ 08068

OFFICIAL USE

Certified Mail Fee	\$3.60	0068
Extra Services & Fees (check box, add fee as appropriate)		18
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$7.00	04/27/2021

Sent To Burlington County Plan
 Street and Apt. No., or PO Box No. 49 Canisades Rd. P.O. Box 6000
 City, State, ZIP+4® Mt Holly NJ 08060

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Pemberton NJ 08068

OFFICIAL USE

Certified Mail Fee	\$3.60	0068
Extra Services & Fees (check box, add fee as appropriate)		18
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$7.00	04/27/2021

Sent To Janet L. Dixon
 Street and Apt. No., or PO Box No. 23 Kennedy Lane
 City, State, ZIP+4® Pemberton NJ 08068

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Pemberton NJ 08068

OFFICIAL USE

Certified Mail Fee	\$3.60	0068
Extra Services & Fees (check box, add fee as appropriate)		18
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$7.00	04/27/2021

Sent To William Montgomery
 Street and Apt. No., or PO Box No. 21 Kennedy Lane
 City, State, ZIP+4® Pemberton NJ 08068

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Pemberton NJ 08068

OFFICIAL USE

Certified Mail Fee	\$3.60	0068
Extra Services & Fees (check box, add fee as appropriate)		18
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$7.00	04/27/2021

Sent To Kathryn Forbes + Frederick Roessler
 Street and Apt. No., or PO Box No. 172 Arneys Mount Rd
 City, State, ZIP+4® Pemberton NJ 08068

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Pemberton NJ 08068

OFFICIAL USE

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Extra Services & Fees (check box, add fee as appropriate)		18
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
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<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$7.00	04/27/2021

Sent To Wayne + Madeline Leonard
 Street and Apt. No., or PO Box No. 25 Kennedy Lane
 City, State, ZIP+4® Pemberton NJ 08068

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Pemberton NJ 08068

OFFICIAL USE

Certified Mail Fee	\$3.60	0068
Extra Services & Fees (check box, add fee as appropriate)		18
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$7.00	04/27/2021

Sent To Pemberton Twp Board of Ed.
 Street and Apt. No., or PO Box No. 145 Arneys Mount Rd. PO Box 228
 City, State, ZIP+4® Pemberton NJ 08068

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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OFFICIAL USE

Certified Mail Fee \$3.60

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.55

Total Postage and Fees \$7.00

Postmark Here 04/27/2021

Sent To **Zoning Board Secretary/Clerk**
 Street and Apt. No., or P.O. Box No. **500 Pemberton Browns Mills Rd**
 City, State, ZIP+4® **Pemberton NJ 08068**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
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 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$3.60

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.55

Total Postage and Fees \$7.00

Postmark Here 04/27/2021

Sent To **State Agri. Development Committee**
 Street and Apt. No., or P.O. Box No. **P.O. Box 336**
 City, State, ZIP+4® **Trenton NJ 08625**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.55

Total Postage and Fees \$7.00

Postmark Here 04/27/2021

Sent To **Stephanie & Charles Martin Jr.**
 Street and Apt. No., or P.O. Box No. **2 Kennedy Lane**
 City, State, ZIP+4® **Pemberton NJ 08068**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.55

Total Postage and Fees \$7.00

Postmark Here 04/27/2021

Sent To **PSE+G**
 Street and Apt. No., or P.O. Box No. **10 Park Plaza T6B**
 City, State, ZIP+4® **Wilmar NJ 07102**

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<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.55

Total Postage and Fees \$7.00

Postmark Here 04/27/2021

Sent To **The Pinelands Commission**
 Street and Apt. No., or P.O. Box No. **P.O. Box 359**
 City, State, ZIP+4® **Wm Lisbon NJ 08064**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Exhibit B – SSAMP Request

Burlington County Agriculture Development Board

Request for Site Specific Agricultural Management Practice (SSAMP) Recommendation

Commercial Farm Operator: Diane + Grant GABLER

Mailing Address: 419 Kentucky Trail
Browns Mills NJ 08015

Telephone Numbers: 609-284-2080 Diane
609-284-1555 Grant

RECORDED
Burlington County

12/17/2020

PAID FOR
COUNTY RECORDS

Identification of Farm Management Unit:

Municipality	Block	Lot	Acres	Product/Operation	Start Date
Pemberton	800	410	6.82	Produce Farm	2016

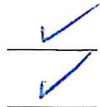
Use additional sheet if necessary.

Annual Gross Receipts from Farm Management Unit Operation: \$ 2020
4400

Describe in detail the specific activity you want the Burlington County Agriculture Development Board to consider for development of a Site Specific AMP and note the location of the activity within your Farm Management Unit.

Shipping container - (multi-use) located to
left of driveway for accessibility for
Online and CSA order pick-up location as well as
prep and pack area of produce

Please return this Request with the following documents (check as attached):



Most recently filed farmland assessment form(s)

Certification Form (blank attached) completed & signed

Exhibit C – Zoning Violation

TOWNSHIP OF PEMBERTON ZONING OFFICE

500 PEMBERTON-BROWNS MILLS RD.
PEMBERTON, NEW JERSEY 08068-1539
(609)-894-3330 FAX(609)-894-2703

ZONING OFFICER'S CERTIFICATION

Zoning Permit# DENIED

Zoning District AR Agricultural Resid. Dist.

Applicant: Diane Gabler

Location: 4 Kennedy Lane Block: 800 Lot: 4.10

Project: Shipping Container

Permitted: ☐ Not Permitted: ☒

Approved: ☐ Denied: ☒ Ordinance: 190-16

The zoning permit is issued in accordance with the application and drawings on file in this office, subject to the Pemberton Township Zoning Code regulating the use and construction of property and buildings. This is not a building permit, nor is it authorization to proceed with construction. **CALL THE OFFICE ONCE PROJECT IS COMPLETED TO SCHEDULE INSPECTION**

Conditions: **DENIED, variance is required from the Zoning Board of Adjustment to permit 40' when 100' is required setback; see attached determination right to farm exempt; this is determined to be a commonly accepted farming practice.**

City Sewer: ☐ Yes ☐ No

City Water: ☐ Yes ☐ No

<u>Principal Building</u>	<u>Area and Yard Requirements</u>		<u>Proposed</u>
	<u>Ordinance No</u>	<u>Required</u>	

Lot Area			
Lot Frontage			
Lot Width			
Lot Depth			
Front Yard Setback			
Side Yard Setback			
Rear Yard Setback			
Building Height			

Accessory Building

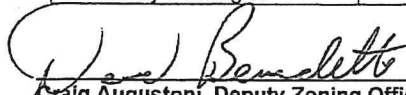
Side Yard Setback			
Front Yard Setback			
Distance Of Building			
Building Height			

Swimming Pool

Side Yard Setback			
Rear Yard Setback			
Distance to Other Structure			

Building Coverage

Principal Building %			
Accessory Building %			


Craig Augustoni, Deputy Zoning Officer

02-10-2021
Date

Applicant Receipt: _____ Date _____

Member	Yes	No	Abstain	Absent
Phillip Prickett	✓			
John H. Hlubik	✓			
Peter Johnson	✓			
Paul Shinn				✓
Sherry Dudas		✓		
Stephen Specca				✓
Jeff Tober (Alt.)			✓	
Kevin Sparkman	✓			
John Kocubinski				✓
Daniel Kennedy	✓			
Ed Cohen	✓			
Randi Rothmel				✓
Brian Lestini			✓	



Chairman Phillip Prickett
Burlington County Agriculture
Development Board

7/8/21
Date